

Your name and address in this box

STANDING ORDER REQUEST

Name of your bank: _____

Address of your bank: _____

Your account number: _____

Your sort-code: _____

Please pay on the:

(delete clearly two of the three options that you do not want to apply)

- 1st day of each **month** for a period of 3 full years only (starting a.s.a.p.) an amount of **£12.50** (twelve pounds and fifty pence).
- 1st January, 1st April, 1st July & 1st October, ie **quarterly** for 3 full years only (starting asap) an amount of **£37.50** (thirty seven pounds and fifty pence).
- 1st day of the month following the receipt of this Standing Order and then **annually** on the same day in consecutive years for a period of 3 full years the amount of **£150** (one hundred and fifty pounds).

To the credit of:

ACCOUNT NAME: Association of Christian Financial Advisors

ACCOUNT NUMBER: 00207048

Ref: _____ Member's Name:
(for internal use only)

BANK: Reliance Bank

SORT CODE: 60-01-73

Authorised Signatory(s) (write name(s) below)